

FEB 02 2006

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/804,973	
	Filing Date	March 19, 2004	
	First Named Inventor	KENNEDY	
	Art Unit	3764	
	Examiner Name		
Total Number of Pages in This Submission	4	Attorney Docket Number	6865-18-2

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input checked="" type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): copy of Applicant's birth certificate
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Please charge any fee deficiencies or credit any overpayments to Deposit Account No. 50-0951.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Mark D. Passler, Registration No. 40,764 Akerman Senterfitt		
Signature			
Date	2-2-06		

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Mark D. Passler		
Signature		Date	2-2-06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEB 02 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of KENNEDY et al.

Application No. 10/804,973

Examiner:

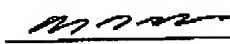
Filed: March 19, 2004

Group Art Unit: 3764

For: MESSAGE DEVICE

PETITION TO MAKE SPECIAL UNDER 37 C.F.R. § 1.102(c)CERTIFICATE OF TRANSMISSION/MAILING

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 Reg. No. 40,764
Mark D. Passler

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to 37 CFR §1.102 and MPEP 708.02, paragraph IV, Applicants hereby petition to make special for an advancement of examination the above-referenced patent application.

Pursuant to 37 C.F.R. §1.102(c) no statutory fee is required for this Petition. However, the Commissioner is hereby authorized to charge any deficiency in any fees due with the filing of this paper or credit any overpayment in any fees paid on the filing, or during prosecution of this application to Deposit Account No. 50-0951.

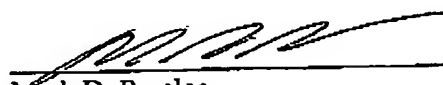
In accordance with the provisions of 37 CFR §1.102(c) and MPEP 708.02, paragraph IV, entitled "APPLICANTS AGE" Applicants respectfully request advancement of examination for the above-referenced patent application. One of the named inventors, Inventor Melvin R.

Kennedy, was born on August 22, 1940. Accordingly, the age of Applicant Melvin R. Kennedy is currently 65, which fulfills the statutory requirement under 37 CFR §1.102(c) for an applicant to be 65 years of age or older. A copy of Applicant Melvin R. Kennedy's birth certificate is enclosed as evidence of his age.

Applicants respectfully request a timely grant of this petition to make special for an advancement of examination under 37 CFR §1.102(c) and MPEP 708.02.

Respectfully submitted,

Date: 2-2-06


Mark D. Passler
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West Palm Beach, FL 33401-3188
Telephone: (561) 653-5000
Facsimile: (561) 659-6313

Docket No. 6865-18-2

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF TULARE
VISALIA, CALIFORNIA

RECORD No. 5454 REGISTRAR'S No. 67

1. FULL NAME OF CHILD MELVIN RAY KENNEDY		2. PLACE OF BIRTH: (a) COUNTY Tulare (b) CITY OR TOWN Strathmore - Rural (c) NAME OF HOSPITAL OR INSTITUTION At Home - Strathmore (d) MOTHER'S STATE RESIDENCE RELAYED? (e) HOSPITAL OR INSTITUTION		3. USUAL RESIDENCE OF MOTHER California (a) CITY OR TOWN Strathmore (b) COUNTY Tulare (c) NAME OF HOSPITAL OR INSTITUTION Rural	
4. SEX Male		5. DATE OF BIRTH August 22, 1940		6. DATE OF REGISTRATION August 22, 1940	
7. FATHER OF CHILD 8. FULL NAME Stanley Paul Kennedy 9. COLOR OR RACE White		10. AGE AT BIRTH OF CHILD 26		11. MOTHER OF CHILD 12. FULL NAME Norothy Elizabeth Gerdes 13. COLOR OR RACE White	
14. LENGTH OF RESIDENCE IN CALIFORNIA 13		15. BIRTHPLACE California		16. USUAL OCCUPATION Housewife	
17. USUAL OCCUPATION Rancher		18. INDUSTRY OR BUSINESS		19. CHILDREN BORN TO THIS MOTHER	
20. CHILDREN BORN TO THIS MOTHER		21. HOW MANY OTHER CHILDREN OF THIS MOTHER ARE NOW ALIVE		22. HOW MANY OTHER CHILDREN WERE BORN ALIVE BUT ARE NOW DEAD	
23. I HEREBY CERTIFY, THAT I ATTESTED THE BIRTH OF THIS CHILD IN THE PRESENCE OF THE MOTHER		24. DATE RECEIVED BY LOCAL REGISTRAR 8/27/1940		25. REGISTRAR'S SIGNATURE W.R. Moore	
26. GIVEN NAME ADDED		27. DATE RECEIVED BY LOCAL REGISTRAR		28. REGISTRAR'S SIGNATURE	
29. (a) PRESENT, COMPLICATIONS OF		30. (b) PRESENT, COMPLICATIONS OF		31. (c) WAS THERE AN OPERATION FOR DELIVERY?	
32. (d) WAS THERE AN OPERATION FOR DELIVERY?		33. (e) WAS THERE AN OPERATION FOR DELIVERY?		34. (f) WAS THERE AN OPERATION FOR DELIVERY?	
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80. (az) WAS THERE AN OPERATION FOR DELIVERY?		81. (ba) WAS THERE AN OPERATION FOR DELIVERY?		82. (bb) WAS THERE AN OPERATION FOR DELIVERY?	
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95. (bo) WAS THERE AN OPERATION FOR DELIVERY?		96. (bp) WAS THERE AN OPERATION FOR DELIVERY?		97. (bq) WAS THERE AN OPERATION FOR DELIVERY?	
98. (br) WAS THERE AN OPERATION FOR DELIVERY?		99. (bs) WAS THERE AN OPERATION FOR DELIVERY?		100. (bt) WAS THERE AN OPERATION FOR DELIVERY?	

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH

CERTIFICATE OF LIVE BIRTH

U. S. DEPT. OF COMMERCE
BUREAU OF THE CENSUS

173275

STATE OF CALIFORNIA
COUNTY OF TULARE

CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the Tulare County Recorder.

DATE ISSUED **OCT 25 1992**

This copy not valid unless prepared on engraving border displaying date, seal and signature of Recorder.

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